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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB Number: 3235-0076 Expires: March 30, 2008 Estimated average burden hours per form.....16.0

SEC USE ONLY						
Prefix	Serial					
	_					
DATE RECEIVED						

							
Name of Offering (check if this is an amendment and name has changed, and indicate change.)							
Series A Preferred Stock of Gravitonus, I		ock a	nd Common Stock issu	able upon convers	ion)		
Filing Under (Check box(es) that apply):	☐ Rule 504		Rule 505	☒ Rule 506	□ Se	ection 4(6)	DULOE
Type of Filing:		×	New Filing		☐ Ame	ndment	
	A. BASI	CIE	ENTIFICATION DA	TA			
1. Enter the information requested abo	ut the issuer	_					
Name of Issuer (check if this is an am	endment and name has changed,	and	indicate change.)				
Gravitonus, Inc.							
Address of Executive Offices	(Number and St	reet,	City, State, Zip Code)	Telephone Num	ber (Includir	ig Area Code)	
4031 University Drive, Suite 200, Fairfa	k, VA 22030	_		(703) 362-1464			
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)							
(if different from Executive Offices)			PR	DCF.sc=	n		
Brief Description of Business				AAFÂOE	U		— I
Providing analysis of media to mark, identify, and categorize merchandise via the internet. APR 2.1 2000							
Type of Business Organization		_		·· <u>* 1 - ZUUS</u>	·		
☑ corporation	☐ limited partnership, alread	v for	med AH	OMSON	O other (please specify):	
D business trust	, ,,	•	\STA		Li onici (prease specify).	
Li business trust	☐ limited partnership, to be t			MACHE			
Autual or Estimated Data of Incompanie	0	ľ		<u>'ear</u> 07			
Actual or Estimated Date of Incorporatio	n or Organization.		03	01	Actual	п	Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:							
	CN for Canada; FN for	other	foreign jurisdiction)			VA	4

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner			
Full Name (Last Kosik, Alexey	name first, if individual)							
	idence Address (Number and Drive, Suite 200, Fairfax, VA							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner			
Full Name (Last Ferrin, Marshall	name first, if individual)							
	idence Address (Number and S Drive, Suite 200, Fairfax, VA							
Check Boxes that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Kosik, Taras	name first, if individual)							
	idence Address (Number and S Drive, Suite 200, Fairfax, VA							
Check Boxes that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner			
Kosik, Leonid	name first, if individual)							
	dence Address (Number and S Drive, Suite 200, Fairfax, VA							
Check Boxes that Apply:	Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Telnov, Sergey	name first, if individual)							
	idence Address (Number and S Drive, Suite 200, Fairfax, VA							
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last	name first, if individual)							
Business or Res	dence Address (Number and S	Street, City, State, Zip Code)		•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner			
Full Name (Last	Full Name (Last name first, if individual)							
Business or Resi	dence Address (Number and	Street, City, State, Zip Code)						

				В	. INFORM	IATION AB	BOUT OFFI	ERING				
1.	Has the issuer sold,	or does the iss	uer intend to				•	?g under ULOI			Yes N	
2.	What is the minimum investment that will be accepted from any individual?							o minimum				
3.	Does the offering pe	ermit joint owr	ership of a s	ingle unit?.	*****************						Yes <u>X</u> N	lo
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.											
N/	A											
	Name (Last name fir	rst, if individua	al)									
		,	,									
Bus	iness or Residence A	ddress (Numbe	er and Street,	City, State	, Zip Code)				,,			
Nan	ne of Associated Bro	ker or Dealer										
Ot				1 6 . 17 . 3								
	es in Which Person L eck "All States" or cl											All States
) [AL		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
iL)		(IA)	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT	• •	įnvi	[NH]	ןנאן ונאן	[NM]	NY)	INCI	[ND]	, , [ОН]	OK	(OR)	[PA]
[RI]	ISC]	[SD]	ITNI	[TX]	(UT)	[VT]	[VA]	[VA]	[WV]	[WI]	JWY]	(PRI
Full	Name (Last name fir	rst, if individua	ıl)		<u> </u>						<u> </u>	
							_					
Busi	iness or Residence A	ddress (Numbe	er and Street,	City, State,	, Zip Code)							
Nam	ne of Associated Brol	ker or Dealer										
State	es in Which Person L	isted Has Solid	cited or Inten	ds to Solici	t Purchasers	;						
(Che	ck "All States" or ch	neck individual	States)									🗆 All States
AL	[AK]	[AZ]	JARJ	{CA}	(CO)	(CT)	[DE]	[DC]	(FL)	GA	(HI)	[ID]
[IL]	[IN]	[IA]	(KS)	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT	[NE]	[NV]	lhhl	[NJ]	[NM]	[NY]	INCI	[ND]	[OH]	(OK)	[OR]	[PA]
[RI]		[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[VA]	ĮWVĮ	[WI]	[WY]	[PR]
Full	Name (Last name fir	rst, if individua	l)									
Busi	ness or Residence A	ddress (Numbe	er and Street,	City, State,	Zip Code)							
Nam	e of Associated Brol	ker or Dealer					_			-		
State	es in Which Person L	isted Has Solid	ited or Inten	ds to Solici	Durchacom							
	ck "All States" or ch											
[AL]		[AZ]	[AR]	[CA]	(CO)	[CT]	[DE]	[DC]	[FL]	[GA]	(HII	[ID]
		[142] [1A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	(OR)	 [PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	įwvį	įwij	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." transaction is an exchange offering, check this box 🛘 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt Equity..... 1,500,000.00 100,000.00 Preferred Common Convertible Securities (including warrants) \$ ____1,500,000.00 100,000.00 Partnership Interests Other (Specify _____) Total \$ ____1,500,000,00 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Investors Dollar Amount of Purchases Accredited Investors 100,000.00 Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Security Sold Type of Offering Rule 505 Regulation A..... Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the

information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees..... Printing and Engraving Costs..... × 15,000.00 Legal Fees..... Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) × 250,00 Other Expenses (Identify) blue sky filing fees Ø Total 15,250.00

securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The

C. OFFERING PRICE, NUMBER OF I	NVESTORS, EXPENSES AND	USE OF PROCEEDS	
 Enter the difference between the aggregate offering price given in rein response to Part C - Question 4.a. This difference is the "adjusted" 	sponse to Part C - Question 1 and gross proceeds to the issuer"	total expenses furnished	\$ <u>1,484,750.00</u>
 Indicate below the amount of the adjusted gross proceeds to the issuer u If the amount for any purpose is not known, furnish an estimate and o payments listed must equal the adjusted gross proceeds to the issuer set f 	theck the box to the left of the es	stimate. The total of the	Payment To
		Directors, & Affiliates	Others
Salaries and fees		□ s	□ s
Purchase of real estate		□ \$	□ s
Purchase, rental or leasing and installation of machinery and equipment	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	□ s	□ s
Construction or leasing of plant buildings and facilities	***************************************	□ s	□ s
Acquisition of other businesses (including the value of securities involved in in exchange for the assets or securities of another issuer pursuant to a merger) Repayment of indebtedness	□ s		
Working capital		□ \$	□ \$
Other (specify):		□ \$	\$ 1,484,750,00
Outer (specify).		□ \$	□ s
		□ s	□ s
Column Totals		□ \$	\$ 1,484,750.00
Total Payments Listed (column totals added)		× \$	484,750.00
D. FED	ERAL SIGNATURE		
The issuer had duly caused this notice to be signed by the undersigned duly a	uthorized nerson. If this notice is	filed under Rule 505, the f	ollowing signature constitutes
an undertaking by the issuer to furnish to the U.S. Securities and Exchange C non-accredited investor pursuant to paragraph (b)(2) of Rule 502.			
Issuer (Print or Type)	Signature		Date
Gravitonus, Inc.	Jac		April 09 2008
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
Alexey Kosik	President		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE			
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No X	

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to the state administrator of any state in which the notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to any state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

	Issuer (Print or Type) Gravitonus, Inc.	Signature Date April 292008
	Name (Print or Type)	Title (Print or Type)
ı	Alexey Kosik	President

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

END